PTC/SB/06 (08-03)
Approved for tise through 7/31/2006, OMB 0651-0032
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number Application of Docket Number		
	01.40.40							133	at so	30
CLAIMS AS FILED - P/ (Column 1)				(Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
		ER FILED	MUNE	MUMBER EXTRA		RATE	FEE	7		
BASIC FEE (37 OFR 1,18(4))					1		1	1	RATE	FEE
TOTAL CLAIMS O7 CFR 1.18(c))					1		<u> </u>	OR .		\$
NOEPENDENT CLASMS		csinus 2			-	× 3•		OR	X 1•	
		colnus 3	3		4	x s•		OR	X \$ c	
MALTIPLE DEPENDENT CLAIM PRESENT (27 CFR 1.16(4))						+8		OR	+1	
" if the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
CLA	ims as am	ENDED	- PART II							
	(Calumn 1)		(Column 2)	(Cotumn 3)		SMALL	ENTITY	OR		R THAN ENTITY
Z 8 ,	REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
the case s'refeth	50	Minus	"55°			x 8		OR.	x s -	FEE
CALCULATION .	7_	Minus	8	•		x s		OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASH (27 CFR 1.18(4))						+1 0		OR		
						TOTAL ADD'L FEE			TOTAL	
	(Caluma 1)			40-1 - A)		worker (····	OR	ADD'L FEE	
2	CLAMS		(Column Z)	(Column 3)	ſ			:		
1 7 1 2 4 5 6 6 7 8	REMAINING AFTER MENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Total (IF CFA LISE(S)	50	Minus	55	•		x \$	FEE			FEE
Ti (to cear rieds)	7	Mirus	"" 8	• /		X :		OR · OR		
FREST PRESENTATION OF MULTIPLE DEPENDENT CLASS (37 CFR 1.4E(d))						•••		OR	^* <u></u>	
1001						TOTAL ADD'L FEE		OR E	TOTAL	1/
(6	Calumn 1)		(Calvann 2)	(Column 3)	•			OR	ADDL FEE	VI
	CLAMS EMASHING SAFTER RENDMENT		HIGHEST NUMBER PREVIOUSLY PAID EOR	PRESENT EXTRA		RATE	ADDI- TIONAL	ſ	RATE	ADD4 TRONAL
Total (27 CFR 1.14(LS	501	Minus	55	•	T,		FEE.			FEE
Total (27 CFR 1.16)(3) Independent (27 CFR 1.18)(3)	7	Mirws	-8	•			/	OR	×3/	-
FIRST PRESENTATION OF MALTPLE DEPONDENT CLAM (D7 CFR 1.16(6))							/	OR OR	× \$/	
				<u> </u>		TOTAL VOD'L FEE		-	+/s	 -
* If the entry in contamn 1 is less than the entry to solumn 2, write "If in column 3, "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20", "If the "Highest Mumber Previously Paid For" IN THIS SPACE is less than 3, enter "3".										
The "Highest Number	er Previously Pa	de For th	Y THIS SPACE 6	fess than 3, ent	3	·.		/	•	1
colection of informatio	n la encuirad b	17 CED	1 14 The late	my G ONE PERMIT	4 (14,5)	TOURS IN BY	e septropriste	pax po cop	uma 1.	

USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Traderiark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Petents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and salect option 2.